

ISSUE STAPLE AREA (for additional cross references)

POS	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	ice	JCS/705	05/10/01
RESPONSE FORMALITY REVIEW	request	925	08-29-01

### INDEX OF CLAIMS

Rejected N Non-elected  
 Allowed I Interference  
 (Through numeral) Canceled A Appeal  
 Restricted O Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here.

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